

## PREVENTION UPDATE

# Update on the NIAAA Task Force on College Drinking Recommendations

#### Overview

In 2002 the National Institute on Alcohol Abuse and Alcoholism (NIAAA) issued a groundbreaking report, A Call to Action: Changing the Culture of Drinking at U.S. Colleges. This report was developed by the NIAAAsupported Task Force on College Drinking after three years of intensive discussions. It described new understanding of dangerous drinking behavior by college students and its consequences for both drinkers and nondrinkers. Rather than debate how many students drink how much, the task force focused on addressing the consequences. In its report, the task force outlined a series of recommendations for colleges and universities, researchers, and NIAAA. At the core of the recommendations is the recognition that successful interventions occur at three distinct levels, referred to as the 3-in-1 framework. This approach calls for interventions to operate simultaneously to reach individual students, the student body as a whole, and the greater college community. The task force members also grouped commonly used intervention strategies into four tiers, based on the degree of scientific evidence supporting them. Tier 1 represents the most effective strategies to prevent and reduce college drinking. Tier 2 represents strategies that have been successful with the general population and that could be applied to college environments. Tier 3 represents strategies that show logical and theoretical promise but require more comprehensive evaluation. Finally, Tier 4 approaches are those not likely to be effective and limited resources should be used in other ways. What distinguishes this guidance from others is its firm reliance on scientific evidence and its call for collaboration between academic institutions and researchers. In response to the information and recommendations in the report, NIAAA committed an additional \$8 million over the following two fiscal years to the issue of college drinking. It also collaborated with several college presidents to determine the effectiveness of policies aimed at reducing the problem.

A 2007 NIAAA report called *What Colleges Need to Know Now: An Update on College Drinking Research* found that there was additional research evidence supporting the Tier 1 strategies of providing alcohol screening and brief interventions for identifying and addressing harmful drinking among college students and the Tier 2 strategies, which call for campus-community partnerships to apply comprehensive intervention aimed at the entire student body and the surrounding community. For example, since the original task force report was issued, several studies have evaluated the campus-community partnership approach specifically for college communities, with encouraging results. They found that colleges can effectively address student drinking by working with authorities in their surrounding communities to implement efforts to reduce access to alcohol, including compliance checks, reducing alcohol outlet density, mandatory responsible beverage service training, and increasing the price of alcohol. Approaches like social norms marketing campaigns (Tier 3) and informational, knowledge-based, or values clarification interventions when used alone (Tier 4) remained unchanged in terms of research evidence regarding effectiveness.

Given the recommendations in NIAAA's 2002 *Call to Action* and 2007 update, what are colleges and universities doing when it comes to addressing high-risk drinking and associated problems? To answer that question, researchers at the <u>Alcohol Epidemiology Program at the University of Minnesota</u> surveyed 351 four-year colleges in the United States to ascertain familiarity with and progress toward implementation of NIAAA recommendations.



#### What the Evidence Tells Us

According to "Implementation of NIAAA College Drinking Task Force Recommendations: How Are Colleges Doing 6 Years Later?" administrators at most of the colleges surveyed were familiar with NIAAA recommendations, although more than one in five (22 percent) were not. Nearly all colleges used educational programs—a Tier 4 strategy—to address student drinking (98 percent). Half the colleges (50 percent) offered intervention programs with documented efficacy for students at high risk for alcohol problems (Tier 1 strategies). Few colleges reported that they had implemented empirically supported, community-based alcohol control strategies (Tier 2 strategies), including conducting compliance checks to monitor illegal alcohol sales (33 percent), instituting mandatory responsible alcohol beverage service (RBS) training (15 percent), restricting alcohol outlet density (7 percent), or increasing the price of alcohol (2 percent). Less than half the colleges with RBS training and compliance checks in their communities actively participated in these interventions. Large colleges were more likely to have RBS training and compliance checks, but no differences in implementation were found across public/private status or whether the college president signed the Amethyst Initiative, which urged consideration of lowering the legal drinking age. The researchers concluded, "Many colleges offer empirically supported programs for high-risk drinkers, but few have implemented other strategies recommended by NIAAA to address student drinking. Opportunities exist to reduce student drinking through implementation of existing, empirically based strategies."

### Lessons Learned from Colleges and Universities

The Harvard School of Public Health College Alcohol Study (CAS), which started in 1992 and ended 14 years later, included evaluation of the A Matter of Degree (AMOD) program. The AMOD program was a demonstration initiative at 10 universities to reduce binge drinking and related harms among college students by changing campus and community environments. "Participant sites implemented program and policy interventions to change the alcohol environment on and off campus, such as mandatory responsible beverage-service training, greater monitoring and service standards for alcohol outlets, keg registration, parental notification policies, greater supervision and more stringent accreditation requirements for fraternity/sorority organizations, cracking down on unlicensed alcohol sales, and increasing substance-free residence hall offerings and alcohol-free activities. These interventions targeted the easy accessibility, low price, and heavy marketing of alcohol prevalent in college communities." In "What We Have Learned From the Harvard School of Public Health College Alcohol Study: Focusing Attention on College Student Alcohol Consumption and the Environmental Conditions That Promote It," the researchers found that results from the AMOD program demonstrate that environmental prevention efforts, which are for the most part Tier 2 strategies, can be implemented, even in the face of resistance from invested stakeholders, such as students and the alcohol industry.

Toben F. Nelson, Sc.D., University of Minnesota, who co-authored both the *How Are Colleges Doing* and *What We Have Learned* studies, said, "There is a considerable effort and cost associated with doing Tier 2 strategies—particularly to the alcohol industry. Colleges and universities are reluctant to confront those challenges. In my view, we are picking away at this issue. We need to go at it directly by dealing with the easy availability of low-cost alcohol in these college towns."

## **Higher Education Center Resources**

Environmental Management: An Approach to Alcohol and Other Drug Prevention

Evaluating Environmental Management Approaches to Alcohol and Other Drug Abuse Prevention

This Prevention Update (offering an overview of current topics, news, legislation, research, or innovations in the field) was funded by the Office of Safe and Drug-Free Schools at the U.S. Department of Education under contract number ED-04-CO-0069/0005 with Education Development Center, Inc. The contracting officer's representative was Phyllis Scattergood. The content of this Prevention Update does not necessarily reflect the views or policies of the U.S. Department of Education, nor does the mention of trade names, commercial products, or organizations imply endorsement by the U.S. government. This Prevention Update also contains hyperlinks and URLs for information created and maintained by private organizations. This information is provided for the reader's convenience. The U.S. Department of Education is not responsible for controlling or guaranteeing the accuracy, relevance, timeliness, or completeness of this outside information. Further, the inclusion of information or a hyperlink or URL does not reflect the importance of the organization, nor is it intended to endorse any views expressed, or products or services offered.